



A Service of the Maryland Health Benefit Exchange

Maryland Health Connection

P. O. Box 857

Lanham, MD 20703-0857

Notice Date:

Application Date:

Maryland Health Connection ID:

name of applicant with missing income verification

street # and street name

apt or suite or unit #

city, state and zip code

We Need More Information

Thank you for applying for health insurance coverage through Maryland Health Connection. We have received your application and need more information to complete your eligibility. Please send us the information listed below within **15 days** or your application will be closed.

We are unable to verify your Social Security Number.

Please provide one of the following documents:

- The 9-digit Social Security number for this applicant
- Official Social Security Administration document with the entire Social Security Number on it

How to Submit Your Documents

You must copy this letter and attach it to the documents you are providing. The letter will serve as a cover sheet. There are three ways you can submit a copy of this letter and your documents:

- In person: at your local Health Department, local Department of Social Services, or Connector Entity
- By mail: P.O. Box 857 Lanham, MD 20703-0857
- By fax: 1-855-642-8574

Do not send original documents. Please write your Maryland Health Connection ID at the top of any copies you send us. If you have special circumstances that make it difficult for you to submit documents or you have questions, please call 1-855-642-8572 (TTY: 1-855-642-8573).

Sincerely,

Maryland Health Connection

We will keep your information secure and private.

Language services are available to assist you. If you need assistance call 1-855- 642-8572 (TTY: 1-855- 642-8573).
Servicios de traductor están disponibles para asistirlos. Si usted necesita ayuda llame al 1-855- 642-8572 (TTY: 1-855- 642-8573).